

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 3/22/05 2 Serial/Patent # 10/521462

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing Fee Change			\$ 100.00
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT OF REFUND	\$ <u>100.00</u>
8 TO BE REFUNDED BY:	<u>CC</u>
<input checked="" type="checkbox"/> Overpayment	Treasury Check
<input type="checkbox"/> Duplicate Payment	Credit Deposit A/C #:
, <u>19 -- 48810</u>	
No Fee Due (Explanation):	

11 REFUND REQUESTED BY:	<u>Rita White</u>
TYPED/PRINTED NAME:	<u>Rita White</u>
SIGNATURE:	<u>Rita White</u>
OFFICE:	<u>DO/EO</u>
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****	
APPROVED:	DATE:

Legal Master Clamire
7308-9140 ext.
231

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B